	DATEM		205	Application of Docket Number										
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10808207						
									10000201					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL I	ENTITY	 OR		THAN ENTITY		
1	OTAL CLAIM	s ·	. 18				ŀ	RATE	FEE	7	RATE	FEE		
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 385.00	OA	BASIC FEE	770.00		
Ť	OTAL CHARGE	ABLE CLAIMS	18 minus 20=		•			X\$ 9=	1	OR	X\$18=			
IN	DEPENDENT (	CLAIMS	3 minus 3 =		•			X43=		OR.	X86=			
M	ULTIPLE DEPE	NDENT CLAIM F	PRESENT	<u> </u>				+145=	<del>                                     </del>	OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							. (	TOTAL		IOR	TOTAL	770.00		
	A / CLAIMS AS AMENDED - PART II								L	<b>J</b>				
	6 (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR.	OTHER SMALL			
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
3	Total	. 14	Minus,	-20				X\$ 9=		OR	X\$18=			
	Independent	• )	Minus	7		•\$		X43=		OR	.X86=			
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIM			<b> </b>	+145=			+290≈	······································		
								TOTAL	<b> </b>	OR	YOTAL			
								DOIT. FEE		OR	ADOIT. FEE	<u> </u>		
	<del></del>	(Column 1)				(Column 3)	نہ ہ				•			
באי פ	1290	REMAINING AFTER AMENDMENT	•	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENUMENT	Total	.23	Minus	-2	0	<u>3</u>		X\$ 9=		OR	5000-	150		
	Independent	. 5	Minus	in (	5	-2	lt	X43=-		OR	BOD	tho		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											+290=	10.5		
		•	•				L	TOTAL		OR	TOTAL	550		
	•	. •					<b>A</b>	DOIT. FEE		OR ,	ADOIT. FEE	000		
-	<del></del>	(Column 1)		(Colum		(Column 3)		•	·	_				
		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA	·	RATÉ"	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	**		<b>=</b> .		X\$ 9=		OR	X\$18=	r CE		
	Independent	•	Minus	*** .		.e.	ŀ			٠,		· ·		
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43=		OR	X86=	<u>-</u> -		
			•					+145=		OR	+290=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  APOUT FEE										OR .	TOTAL	i		
-4	the Trighest Nurr	ber Previously Pal	d For IN THIS	SPACE IS I	ess than	3, enter "3."		OT. FEE L			DDIT. FEEL			
**		er Previously Paid	ror (Total or	rugebenden	i) is the	miliuszi umúpei	louni	a ou au e subb	KODUSTO DOX	aj cogn	MA 1.			